

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	DEVICE FOR SPRAYING WATER IN THE FORM OF A THIN-WALLED HOLLOW JET FOR THE FORMATION OF ARTIFICIAL SNOW
Attorney Docket Number::	0510-1074
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	5 and 14
Total Drawing Sheets::	8
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: MICHEL
Middle Name::
Family Name:: GALVIN
City of Residence:: CARQUEFOU
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 4 RUE ATHENA

City of Mailing Address:: CARQUEFOU
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 44470

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: ERIC
Middle Name::
Family Name:: DAVID
City of Residence:: TREILLIERES
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 5 IMPASSE PIERRE DE RONSARD

City of Mailing Address:: TREILLIERES
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 44119

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: BERNARD
Middle Name::
Family Name:: PERGAY
City of Residence:: FRANCHEVILLE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 10 ALLEE DU GAMAY

City of Mailing Address:: FRANCHEVILLE
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: 69340

Correspondence Information

Correspondence Customer 000466
Number::

Representative Information

Representative Customer	000466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	0209720	7/31/02	Yes

Assignment Information

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::